PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	Facilitation roles and characteristics associated with research use by healthcare professionals: A scoping review
AUTHORS	Cranley, Lisa; Cummings, Greta; Profetto-McGrath, Joanne; Toth, Ferenc; Estabrooks, Carole

VERSION 1 - REVIEW

REVIEWER	Sharon Mickan
	Gold Coast Health and
	Griffith University
	Queensland
	Australia
REVIEW RETURNED	29-Sep-2016

GENERAL COMMENTS	The research questions are important, but it is not clear why you did not choose to do a systematic review. You reference another similar systematic review at the end of your introduction but you do not clarify the unique contribution of your work. Your search date of 2013 would benefit from an updated search. It is also not good academic practice to exclude a quality assessment of included studies; there are multiple tools to manage multiple study designs. It is important for readers to have an awareness of the underlying quality of contributing studies. Given the large numbers of included studies, you could have focussed your review on the higher quality studies. You describe the diversity of the concept of facilitation in your introduction with reference to its theoretical origins. But you do not follow this theme through your results or more importantly in your discussion. It seems that your facilitator roles are not independent and may in fact be more associated with particular theoretical backgrounds as in educational theory, knowledge translation and health care research. Using Roger's characteristics of innovation is a novel way of describing characteristics of facilitators - but you do not mention whether there were other descriptors that did not fit in this categorisation. However, it is important to document and distinguish between the
	diversity in the extant literature.

REVIEWER	Celine Miani RAND Europe, UK
REVIEW RETURNED	15-Nov-2016

GENERAL COMMENTS	Thank you very much for the opportunity to review this interesting
	study.

The scoping review has been conducted to high standards, following the general principles of conducting reviews in health and healthcare. The main limitations of this review are the exclusion of grey literature, which may have included interesting case studies and the limited evidence on facilitation process, which may have been captured in the grey literature. However these weaknesses are acknowledged in the discussion, which is satisfying. One area for improvement would be, in my opinion, the "characteristics of facilitation" section in the results. The article format and word limit make it difficult to go into the details of each characteristic, resulting in paragraphs that are sometimes too vague or generic. Table 3 and 4 provide those essential details and are really well executed, presenting the findings in a clear and compelling way. Maybe the main body of text, and more specifically the aforementioned characteristics section, would benefit, where word limit allows, from the addition of a couple of examples taken from those tables. This would be particularly useful for the "relative advantage" and the "compatibility" sub-sections.

The comprehensive data charting shown in the supplementary material is a useful addition.

Below are a couple of additional minor suggestions:

- page 10, line 22: the first time that the category "practice facilitators" appears: it would be useful to read "clinical/practice facilitators" instead of "practice facilitators". This would be in line with subsequent occurrences of this role (e.g. p11 line 13).
- page 12, line 37: should the bracket be removed in "from (4 hours)"?
- the four characteristics of "complexity" are not clearly stated. It would be useful to list them, as has been done for other dimensions.

VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

Reviewer Name: Sharon Mickan

Institution and Country: Gold Coast Health and Griffith University, Queensland, Australia

Please state any competing interests: None declared

Please leave your comments for the authors below

1. The research questions are important, but it is not clear why you did not choose to do a systematic review.

Author response: Our team is currently completing a systematic review on facilitation. The scoping review was completed as Phase 1 of a larger synthesis study- Phase 2 is a systematic review on the effectiveness of facilitation as an implementation innovation in health care. Because facilitation is a broad concept, the scoping review was a first step to better understand facilitator roles and characteristics of facilitation, and it enabled us to refine our search terms and objectives for the systematic review.

2. You reference another similar systematic review at the end of your introduction but you do not clarify the unique contribution of your work.

Author response: Thank you for your comment, the unique contribution of our work has been included in the introduction p.7.

In the paper it now reads: "Our review complements and extends the review by Dogherty et al. (2014)

which explored elements of facilitation based on an existing systematic review of the effectiveness of interventions to increase the use of practice guidelines in nursing. Our study adds to the evidence base on facilitation by describing the various roles and the characteristics of facilitation from the healthcare and management literature in the context of healthcare professionals that includes practice guidelines and other forms of research use, and the roles undertaken to facilitate the uptake of evidence."

- 3. Your search date of 2013 would benefit from an updated search.

 Author response: We have updated our search to December 2016 and have included an additional 28 articles into our analysis and results. We have revised our Figure 1 accordingly (page 36).
- 4. It is also not good academic practice to exclude a quality assessment of included studies; there are multiple tools to manage multiple study designs. It is important for readers to have an awareness of the underlying quality of contributing studies. Given the large numbers of included studies, you could have focussed your review on the higher quality studies.

Author response: Given the purpose of our scoping review was to identify facilitator roles and characteristics of facilitation from the literature and following Arksey and O'Malley's (2005) framework, we did not appraise the quality of data extracted; we are therefore unable to weigh the quality of evidence. Arksey and O'Malley indicate that because "quality assessment does not form part of the scoping study remit"(p.7), a narrative or descriptive account of available evidence is provided. Revision made in the paper: This limitation is now added to the discussion section (p 20), and also included it in the Strengths and Limitations section (following the abstract).

In the discussion section on page 20, it now reads: "Two main limitations of our review, which may introduce the potential for publication bias, are that we did not include grey literature, nor did we conduct a quality appraisal of included studies as this is not part of a scoping study undertaking (Arksey & O'Malley & Grant & Booth) nor the purpose of our review. The scoping review enabled us to synthesize a breadth of literature that characterizes the quantity, nature and extent of research evidence on facilitation (Grant & Booth, 2009), and the roles undertaken to facilitate the uptake of evidence."

5. You describe the diversity of the concept of facilitation in your introduction with reference to its theoretical origins. But you do not follow this theme through your results or more importantly in your discussion. It seems that your facilitator roles are not independent and may in fact be more associated with particular theoretical backgrounds as in educational theory, knowledge translation and health care research.

Author response: Thank you for your suggestion. We have addressed this comment by adding information about the theoretical underpinnings of the various facilitator roles in the results section (pages 12 & 13 highlighted in yellow) and discussion section (page 18).

6. Using Roger's characteristics of innovation is a novel way of describing characteristics of facilitators - but you do not mention whether there were other descriptors that did not fit in this categorisation. Author response: We have included an additional sentence into the discussion to address this point. Thank you.

In the paper page 19 we have added: "Rogers' attributes of an innovation covered all of the results that we found and therefore it is confirmed to be a comprehensive model to describe characteristics of an innovation."

However, it is important to document and distinguish between the diversity in the extant literature. Author response: Thank you for this the acknowledgement about our discussion of diversity.

Reviewer Name: Celine Miani

Institution and Country: RAND Europe, UK

Please state any competing interests: None declared

Please leave your comments for the authors below

Thank you very much for the opportunity to review this interesting study.

The scoping review has been conducted to high standards, following the general principles of conducting reviews in health and healthcare. The main limitations of this review are the exclusion of grey literature, which may have included interesting case studies and the limited evidence on facilitation process, which may have been captured in the grey literature. However these weaknesses are acknowledged in the discussion, which is satisfying.

1. One area for improvement would be, in my opinion, the "characteristics of facilitation" section in the results. The article format and word limit make it difficult to go into the details of each characteristic, resulting in paragraphs that are sometimes too vague or generic. Table 3 and 4 provide those essential details and are really well executed, presenting the findings in a clear and compelling way. Maybe the main body of text, and more specifically the aforementioned characteristics section, would benefit, where word limit allows, from the addition of a couple of examples taken from those tables. This would be particularly useful for the "relative advantage" and the "compatibility" sub-sections. Author response: Thank you for this suggestion. We have added an example of relative advantage from Table 4 into the paper. For compatibility, we revised our example and added references from table 4.

In the paper (pg 15) the relative advantage example now reads: "For example, a facilitator builds organizational support for new practices and provides structure for learning."

In the paper (pg 16) the compatibility example now reads: "For example, a facilitator understands the climate and practical realities of the organization, and frames knowledge so that it is relevant to staff practice."

The comprehensive data charting shown in the supplementary material is a useful addition.

- 2. Below are a couple of additional minor suggestions:
- page 10, line 22: the first time that the category "practice facilitators" appears: it would be useful to read "clinical/practice facilitators" instead of "practice facilitators". This would be in line with subsequent occurrences of this role (e.g. p11 line 13).

Author response: Thank you for your suggestion, this was an oversight and has now been revised to read clinical/practice facilitator in the Abstract (results section) and also on page 11.

- page 12, line 37: should the bracket be removed in "from (4 hours)"? Author response: Yes, thank you, the bracket has been removed page 14.
- -the four characteristics of "complexity" are not clearly stated. It would be useful to list them, as has been done for other dimensions.

Author response: Thank you for this suggestion. We have listed the four characteristics of complexity on page 16.

In the paper, the beginning of the complexity paragraph now reads: "Facilitation supports the development of new knowledge and skills, requires facilitators to be trained or have experience with this role, may have multiple components, and is described as a bi-directional process that fosters relationship building."

VERSION 2 – REVIEW

REVIEWER	Céline Miani
	RAND Europe, UK
REVIEW RETURNED	11-Jan-2017

GENERAL COMMENTS I am happy with the authors' response and changes made.	nat have been
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